

Plan of Operation
Required pursuant to SF 2356
2010
INSURANCE INFORMATION EXCHANGE

Purpose

The Insurance Information Exchange, hereinafter referred to as the Exchange, exists to provide information about available health coverage plans in Iowa, provide coverage options and facilitate enrollment through an insurance professional or designated state agency and act as an impartial source of information.

Governance

The Exchange shall be located in a new or existing State agency, or a quasi-governmental agency with an advisory committee. Members of the advisory committee shall consist of individuals representing carriers, providers, agents/brokers and the public.

The Advisory Committee shall:

Review the plan of operation and submit proposed amendments.

Review outstanding contracts or agreements and make necessary corrections, improvements or additions.

Review operating expenses and outstanding contractual obligations and determine if an assessment is necessary for proper administration of the Exchange.

Review, consider and act on any other matters deemed necessary and proper for the administration of the Exchange.

An annual meeting of the Advisory Committee shall be held at such time and place as the Advisory Committee may determine. The Advisory Committee shall meet at least quarterly.

Duties

The Exchange shall be responsible for collecting data from carriers and public agencies and operation of call center/web portal.

The Exchange shall coordinate and communicate between health plans and Medicaid coverage to ensure seamlessness.

Consumer Disclosure/Transparency

Carriers and public plans shall utilize a standardized format for presenting health coverage options in the Exchange to facilitate comparison of all plans.

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| <i>Annual Deductible</i> | <i>\$per individual</i> |
| <i>Annual Out-of-pocket Maximum</i> | <i>\$per individual</i> |
| <i>Primary Care Physician Office Visit</i> | <i>\$copay</i> |
| <i>Specialist Office Visit</i> | <i>\$copay</i> |
| <i>Outpatient Surgery</i> | <i>\$copay</i> |
| <i>Diagnostic X-Rays/Labs</i> | <i>deductible/copay/coinsurance</i> |
| <i>Hospitalization</i> | <i>deductible/copay/coinsurance</i> |
| <i>Prescription Drugs Tier 1</i> | <i>\$copay</i> |
| <i>Prescription Drugs Tier 2</i> | <i>Rx deductible, then \$copay</i> |
| <i>Prescription Drugs Tier 3</i> | <i>Rx deductible, then \$copay</i> |
| <i>Emergency Room</i> | <i>deductible/copay/coinsurance</i> |
| <i>Monthly Premium</i> | <i>\$\$\$-\$\$\$</i> |

General Operations

Required Operations-advertisement of the general availability of health care information in Iowa, require carriers, organized delivery system, public programs to submit changes quarterly to government agency for updates to web portal

Information Technology/Technical Infrastructure

One front door to all health insurance information

Financing

Start up costs absorbed by state government. On-going operations funded by modest premium/provider assessment.

ITEMS TO CONSIDER IF EXCHANGE MORPHS INTO A PURCHASING TYPE EXCHANGE

- Distribution of Subsidies
- Certification of Individuals/Plans
- Qualified plans must include essential benefits, include quality provisions outlined in the legislation, comply with marketing regulations, provide choice of providers, provide an adequate network of providers, utilize uniform enrollment form, utilize standard format for presenting plan options
- Payment of Premiums
- Marketing
- Competition
- Eligibility and Enrollment